PTO/SB/25 (08/03)

Approved for use through 07/61/205. 0MB 0551-0331
Patent and Trodemark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid. OMB control number,

Certificate of Transmission under 37 CFR 1.8

RECEIVED
CENTRAL FAX CENTER

FEB 2 8 2006

3759

Serial No. 10/647,934

Application of: Troy A. DALSING and Martin DALSING

Filed: August 25, 2003

Art Unit: 3728

Examiner: Johnson, Jerrold D. Attorney Docket No. DALS001

For: REUSABLE CONTAINER FOR CONTACT LENSES AND OTHER MATERIALS

Confirmation No.: 3457
Customer No.: 25235

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office

 Request for Withdrawal as Attorney or Agent and Change of Correspondence Address.

on

28 Teloniamy 2006

No. of Pages (incl. Coversheet)

to centralized fax number: 571-273-8300

Signature

Julie Lange

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or its certificate must identify each submitted paper.

Client Reference No. 19206.0001

Fax No. 719-448-5922

T-193 P.002/002

PTO/SB/83 (01-06)
Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REQUEST FOR WIT		Application No.		10/647,934		
AS ATTORNEY O		Filing Date		August 25, 2003		
AND CHANGE OF CORRESPONDENCE ADDRESS		First Named Inventor		Troy A. DALSING et al.		
		Art Unit		3728		
		Examiner Name		Johnson, Jerrold D.		
		Attorney D	torney Docket No.		DALS001	
To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
Please withdraw me as attorney or agent for the above identified patent application, and						
all the attorneys/agents of record.						
the attorneys/agents (with registration numbers) listed on the attached paper(s), or						
☑ the attomeys/agents associated with Customer Number 25235						
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.						
The reasons for this request are:						
CORRESPONDENCE ADDRESS						
The correspondence address is NOT affected by this withdrawal,						
2. ☑ Change the correspondence address and direct all future correspondence to:						
☐ The address associated with Customer Number						
OR						
Firm or Troy Dalsing						
Address 29175 Paint Mine Rd.						
City	Calhan	State	Colorado	, Z	ZIP	80808
Country	USA					
Telephone		Email				
Signature Make Makes						
Name Michael C. Martensen			Registration No. 46,901		)1	
Date 2/28/06			Telephone	No. 719-448-5910		448-5910
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days days between approval of withdrawal and the excitation date of a time period for response or possible extension period the request to withdraw is normally disponsived.						